#### DO NOT STAPLE OR FOLD

a Control number	33333	For Official U	Jse Only ►
		OMB No. 1545-0008	
		Third control	1 Wages, tips, other compensation 2 Federal income tax withheld
		Third-party sick pay	3 Social security wages 4 Social security tax withheld
c Total number of Forms W-2	d Establishment	number	5 Medicare wages and tips 6 Medicare tax withheld
e Employer identification numbe	er (EIN)		7 Social security tips 8 Allocated tips
f Employer's name			9 Advance EIC payments 10 Dependent care benefits
			11     Nonqualified plans     12     Deferred compensation
			13 For third-party sick pay use only
g Employer's address and ZIP code			14 Income tax withheld by payer of third-party sick pay
h Other EIN used this year			
15 State Employer's state ID	number		16 State wages, tips, etc.   17 State income tax
			18 Local wages, tips, etc. 19 Local income tax
Contact person			Telephone number For Official Use Only   ( ) ••••••••••••••••••••••••••••••••••••
Email address			Fax number ( )

Under penalties of perjury, I declare that I have examined this return and accompanying documents, and, to the best of my knowledge and belief, they are true, correct, and complete.

Signature >

Title 🕨

Date 🕨

# Form W-3 Transmittal of Wage and Tax Statements

Department of the Treasury

# Send this entire page with the entire Copy A page of Form(s) W-2 to the Social Security Administration. Photocopies are not acceptable.

Do not send any payment (cash, checks, money orders, etc.) with Forms W-2 and W-3.

### Reminder

**Separate instructions.** See the 2005 Instructions for Forms W-2 and W-3 for information on completing this form.

### **Purpose of Form**

Use Form W-3 to transmit Copy A of Form(s) W-2, Wage and Tax Statement. Make a copy of Form W-3 and keep it with Copy D (For Employer) of Form(s) W-2 for your records. Use Form W-3 for the correct year. **File Form W-3 even if only one Form W-2 is being filed.** If you are filing Form(s) W-2 on magnetic media or electronically, **do not** file Form W-3.

### When To File

File Form W-3 with Copy A of Form(s) W-2 by February 28, 2006.

## Where To File

Send this entire page with the entire Copy A page of Form(s) W-2 to:

#### Social Security Administration Data Operations Center Wilkes-Barre, PA 18769-0001

2005

**Note.** If you use "Certified Mail" to file, change the ZIP code to "18769-0002." If you use an IRS-approved private delivery service, add "ATTN: W-2 Process, 1150 E. Mountain Dr." to the address and change the ZIP code to "18702-7997." See **Publication 15** (Circular E), Employer's Tax Guide, for a list of IRS-approved private delivery services.

**Do not** send magnetic media to the address shown above.